

11-28-00

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|---------------|--------------------|
| FEE DETERMINATION | <i>[Signature]</i> | | <i>[Signature]</i> |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>Z</i> | <i>41</i> | <i>10/20/00</i> |
| RESPONSE FORMALITY REVIEW | | <i>UC 873</i> | <i>11-14-00</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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